Effective December 8, 2004												12					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL EN	(FY	OR	OTHER SMALL						
U.S	, NATIONAL	STAGE FEES					1	RATE	FEE	1	RATE	FEE					
BAS	SIC FEE		SMALL ENT.	SMALL ENT. = \$ 150 LA		GE ENT. = \$ 300	1	BASIC FEE		OR	BASIC FEE	300					
EXAMINATION FEE			(4) = \$ 50 /	(4) = \$50/\$100		her situations = 100 / \$ 200		EXAM. FEE]	EXAM. FEE	2ω					
SEARCH FEE			U.S. is ISA = \$ 5 ALL other coun \$ 200 / \$ 4	tries =		hersitizations = 250 / \$ 500		SEARCH FEE			SEARCH FEE	500					
FEE	FOR EXTRA	SPEC. PGS.	minus 100 =			/ 50 =		X \$ 125 =		ľ	X \$ 250 =						
TOTAL CHARGEABLE CLAIMS			16 minus 20 = .					X \$ 25 =		OR	X \$ 50 =						
IND	EPENDENT CL	AIMS	minus 3 = .					X \$ 100 =		OR	X \$ 200 =						
MUL	TIPLE DEPEN	DENT CLAIM PRI	ESENT				+ \$ 180 =		OR	+ \$ 360 =	360						
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL						
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							7 1	SMALL E	NTITY	OR	OTHER SMALL E						
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOL PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE					
	Total	. 16	Minus '	20)	=		X \$ 25 =		OR	X \$ 50 =						
	Independent	• /	Minus	··· 3		= /		X \$ 100 =		OR	X \$ 200 =						
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =						
TOTAL ADDIT. FEE											FEE						
		10 -1 1)		(Colum	a 2)	(Column 3)			•								
AMENDMENT B		(Column 1) CLAIMS REWAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID F	ST ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE					
	Total	•	Minus	•		=		X \$ 25 =		OR	X \$ 50 =						
	independent	•.	Minus	***		z·		X \$ 100 =		OR	X \$ 200 =						
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =						
				TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE										
	.			uella en L		,				,							
•	If the Highest Nu	mber Previously Pai	d For IN THIS SPA d For IN THIS SPA	CE is less	* If the entry in column 1 is less than the entry in column 2, write "O" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number